								Application or Docket Number						
	PATENT	APPLICATIO		RD	D									
Effective January 1, 2003									39611-8016US					
CLAIMS AS FILED - PART I								SMALL ENTITY				OTHER THAN		
(Column 1) (Column 2)							TYPE			OR				
TOTAL CLAIMS			19				RAT	E	FEE	1	RATE	FEE		
FOR			NUMBER FILED		NUMBER EXTRA		BASIC	FEE	375.00	OR	BASIC FEE	750.00		
TOTAL CHARGEABLE CLAIMS			/9_ minus 20=		· 6.		X\$ 9	X\$ 9=		OR	X\$18=			
INDEPENDENT CLAIMS			3- m	inus 3 =	0		X42=		OR	X84=				
MULTIPLE DEPENDENT CLAIM PRESENT						+140	)=		OR	+280=				
† If the difference in column 1 is less than zero, enter "0" in column 2								۸L	375,0		TOTAL			
1	/ C			27370	JØ	OTHER	THAN							
7	CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)								ENTITY	OR	SMALL			
AMENDMENT A		CLAIMS REMAINING		HIGH NUM	BER	PRESENT	DAT	_	ADDI-		DATE	ADDI-		
		AFTER AMENDMENT		PREVIO		EXTRA	RAT		TIONAL FEE		RATE	TIONAL FEE		
	Total	1.14	Minus	**		=	X\$ 9	=_		OR	-X\$18=-			
	Independent	· 8	Minus	*** 4	$\supset$	3	X42:	=		OR	X84=			
Ľ	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							=		OR	+280=			
								TAL		OB.	TOTAL			
(Column 1) (Column 2) (Column 3)								EE		On	ADDIT. FEE			
Г		(Column 1) CLAIMS		HIGH		(Column 3)		_	ADDI-	1 1		4001		
AMENDMENT B		REMAINING AFTER AMENDMENT		PAID	DUSLY	PRESENT EXTRA	RATI		TIONAL FEE		RATE	ADDI- TIONAL FEE		
	Total	*	Minus	**		=	X\$ 9	=		OR	X\$18=			
	Independent	* NTATION OF MI	Minus	BENDENT	CLAISE	-	X42:			OR	X84=			
_	PINOT PRESE	INTATION OF MIC	DETIFIE DE	PENDENI	CLAIM		+140	=		OR	+280=			
							TOT ADDIT. F			OR	TOTAL ADDIT. FEE			
		(Column 1)		(Colur	nn 2)	(Column 3)								
[		CLAIMS		HIGH	EST	3 4 7		$\neg$	ADDI-			ADDI-		
AMENDMENT C		REMAINING AFTER AMENDMENT		PREVIO PAID	DUSLY	PRESENT EXTRA	RATI		TIONAL FEE		RATE	TIONAL FEE		
	Total	*	Minus	**		•	X\$ 9	=		OR	X\$18=			
ME	Independent		Minus	***		=	X42=			00	X84=			
4	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							$\dashv$		OR	,			
+140=										OR	+280=	<u> </u>		
**	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ADDIT. FEE  OR  ADDIT. FEE													
		mber Previously Pa hber Previously Pa							propriate box					

\*U.S. Government Printing Office: 2003 -- 498-278/69151

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